

## SOLICITATION / ITINERANT VENDOR APPLICATION



Date(s) of set-up: \_\_\_\_\_

Individuals Name: \_\_\_\_\_ Business Name: \_\_\_\_\_

Current Occupation: \_\_\_\_\_

Current Individuals Address: \_\_\_\_\_

(Physical address, city, state, zip)

Telephone Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Drivers License Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Physical Description of Applicant:

Sex: \_\_\_\_\_

Race: \_\_\_\_\_

Height: \_\_\_\_\_

Weight: \_\_\_\_\_

Hair Color: \_\_\_\_\_

Eye Color: \_\_\_\_\_

Other Description: \_\_\_\_\_

Photograph:



Description of goods to be sold: \_\_\_\_\_

Goods are to be sold(circle one): Door-to-door Stationary location Vehicle

Name, address, phone # of owner of property: \_\_\_\_\_

Application must be accompanied by a written permission signed by the owner or the duly authorized agent of the owner of the property at the location from which the applicant proposes to display.

Name, address, and phone # of manufacturing location and/or shipping location: \_\_\_\_\_

I, \_\_\_\_\_, have not been convicted of a felony offense in the last five years.

\_\_\_\_\_  
signature

\_\_\_\_\_  
Date

**Please attach a copy of a Valid Sales Tax Permit issued by the State of Texas.**

Length of permit requested: 30 days 6 month One Day License

Fee: \$75.00 \$100.00 \$50.00

(No personal checks please)

Not later than three (3) days after a completed application is filed, the applicant shall be notified in writing of the decision of the issuance or denial of the permit unless the day filed is a Thursday or Friday. Then the applicant shall be notified not later than six (6) days after a completed application is filed.

### Warranties and Claims:

Applicant must display at all times during which such person is doing business, a sign lettered in two-inch letters and visible to all present specifying the type and duration of any warranties made on such goods and the address where any purchaser may make a claim for breach thereof.

\_\_\_\_\_  
Initials I have seen warranty sign.

### Food Vendors:

Applicant shall secure on this form a copy of their area Health Departments food handlers card/license.